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APPLICANTS

Uril Gerard Greene, Ormond Beach, FL;

 Alan Thomas Greene, Ormond Beach, FL;
 Aisha Mirette Greene, Ormond Beach, FL;

** CONTINUING DATA *****

NONE DA

** FOREIGN APPLICATIONS *****

NONE DA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/26/2004

** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>[Signature]</u> Initials <u> </u>	STATE OR COUNTRY FL	SHEETS DRAWING 2	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 2
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ADDRESS

 000039649
 URIL GREENE
 27 RIVER RIDGE TRAIL
 ORMOND BEACH , FL
 32174

TITLE

Greene mosquito maze

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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